



Rhinoplasty

COMMONLY ASKED QUESTIONS

1. WHY DO I HAVE DRAINAGE DOWN THE BACK OF MY THROAT?

- In a normal day, the nose secretes about a cup (250ml) of mucus that goes down the back of your throat without your being aware of it. However, once you have surgery and the nose is stuffed up, you become very aware of this normal secretion. It is nothing to worry about.

2. WHY DO I HAVE MORE DRAINAGE FROM MY NOSTRILS ONE DAY AFTER SURGERY? CAN I TAKE AN ANTIHISTAMINE/ALLERGY MEDICINE TO STOP IT?

- The combination of “normal mucus drainage” and “intranasal swelling” can cause the mucus drainage to come out the nostrils rather than go down the back of the throat. Yes, you can take an over-the-counter antihistamine by mouth or any other medicine that you normally take to dry up a cold.

3. IF DR. DOWER DIDN'T PACK MY NOSE, WHY AM I STUFFED UP?

- It is very common to be “stuffed up” after surgery. The reason is that there is as much swelling inside the nose as outside of it. This swelling will peak on the second day, and then go down slowly thereafter.

4. I HAVE A HEADACHE AND TROUBLE SLEEPING. IS THIS NORMAL? CAN I TAKE ANYTHING FOR IT?

- Unfortunately, headaches are common following general anesthesia and surgery. Take the prescribed pain medication as needed for this. After the night of surgery, you may take a light sleeping aid if you need it.

5. IT HAS BEEN TWO DAYS SINCE MY SURGERY. WHY IS MY SWELLING AND BRUISING WORSE?

- Typically, swelling and bruising peak on the second post-operative day. For this reason, it is best if you can ice your eyes and nasal region for the first three days and sleep with the head of your bed elevated. Also, try to avoid salty foods. The good news is that the swelling decreases rapidly thereafter and the bruising is usually gone by the Seventh post-operative day in about 95 percent of patients.

6. REGARDING DONOR SITES FOR EAR CARTILAGE GRAFTS:

a. Why is there bleeding and oozing?

- These areas are highly vascularized, and once the adrenaline wears off from the local anesthesia, you may have “reflex bleeding or oozing.” It is essentially normal and nothing to worry about. Do not get the yellow ear donor site or the nose cast wet.

b. When can I wash my hair?

- It is usually best to wait until the second day after surgery to wash your hair, and it is often advantageous to have someone wash your hair for you beauty-salon style.

7. HOW DO I CLEAN MY NOSE?

- It is important that twice a day you clean all visible suture lines inside and outside the nose, using hydrogen peroxide and then apply a bacterial ointment.

Rhinoplasty

COMMONLY ASKED QUESTIONS

8. WHEN CAN I RESUME:

a. Wearing my glasses

- It depends on the type of surgery you have had done – If you have had osteotomies and grafts, then as a rule of thumb, you should avoid wearing glasses for at least a month but ideally avoid wearing them for 3 months after surgery.

b. Going out in the sun

- The problem with sun exposure is that your nose will be numb for three to six months, and you can easily burn your skin without being aware of it. Therefore, you should make sure your moisturizer has a sunscreen with an SPF 30-50 (a good idea for everyone) and use it daily on the nose. If you are going to be out in the sun, then wear a hat for the first three months and use a sunscreen on the nose (SPF 30-50). If you are going to the beach or on a boat, wear a hat and frequently apply a 30-50 SPF sunscreen specifically formulated for water sports

9. WHY DO I OCCASIONALLY HAVE A FUNNY SMELL IN MY NOSE?

- At several weeks post-operatively, you may notice an unusual or bad smell in your nose. It is caused by the accumulation of mucus in the nose due to a reduced mobility of the “mucus blanket” within the nose. As you recall, the nose secretes a cup of mucus a day that is propelled into the back of the throat by the nasal lining cells. After surgery, the physiology of the nose takes four to six weeks to come back to normal, but in the interim you can clear the mucosal blanket with intranasal saline sprays.

10. IT HAS BEEN SIX WEEKS SINCE MY SURGERY. WHY DOES MY NOSE SWELL PERIODICALLY?

- Swelling in the nose decreases in two stages. Stage one is a true fluid type swelling which is generalized and comes down in the first two to three weeks.
- Stage two is truly scar remodeling that goes on between the skin and the underlying structures. It comes down sequentially from the top of the nose to the tip in a three-to-six-month to nine-to-12-month progression.
- In the first three months, the nose swells generally from time to time, especially on frontal view – what you see in the mirror. It will diminish with time, and you do not have to worry about it.

Preoperative Skin Preparation Procedure

Skin is not sterile, and although your skin will be prepared with antiseptic before your surgery, the antiseptic can work better if your skin is as clean as possible, particularly the area where an incision will be made.

For best results, you should shower the evening before as well as day of your surgery, using an antibacterial soap. The soap has a protective layering effect which maximizes its effectiveness with every use.

Soap containing chlorhexidine gluconate (CHG) is recommended - an example is Sterisrub and this can be found at most pharmacies. Studies have shown that although CHG works best, it is more important that some form of anti-bacterial soap is used before surgery.

Follow the five steps below to ensure your skin is thoroughly disinfected before surgery.

1. Wet your face and wash with undiluted soap, especially around the nose. Take care to avoid your eyes and ears
2. Wet your body, then use your hands or a single use washcloth to wash your body. Always work downwards. Pay special attention to your armpits, skinfolds, groin, buttocks and anal areas, as well as the area of planned surgery
3. When you've washed all areas, rinse thoroughly under running water.
4. Repeat the previous steps, but this time start with your hair, and then work downwards from your head to your feet.
5. Rinse thoroughly under running water. Dry yourself with a clean towel and put on clean clothes.

IMPORTANT TIPS ABOUT SKIN PREPARATION

- Use gentle friction with a washcloth or soft sponge, avoid rough scrub brushes and harsh scrubbing.
- Please take care not to use this product near your eyes or ears.
- Discontinue use immediately should you experience any skin irritation
- Avoid use if you are allergic to any of the ingredients.
- Bathing is not recommended as bacteria need to be washed off the skin. This is more effectively done in a shower. If one is not available, try to rinse with running water.
- Your towel, clothing (including pajamas worn the night before the procedure) and bed linen must be clean so that organisms are not re-introduced to the skin.
- Wear clean clothes on the day of your surgery
- Do not use lotion, cream, powder or perfume after washing. You may apply deodorant.

HAIR REMOVAL BEFORE SURGICAL PROCEDURE

In the week prior to surgery you should not shave, wax or remove hair with depilatory products in the vicinity of the planned surgery. Shaving causes small, often unseen cuts and abrasions on the skin surface which act as entry sites for bacteria. Depilatory products can cause skin irritation.

Hair is only removed if it will interfere with the surgical procedure. It will be removed as close as possible to the time of surgery, in hospital, using clippers with a single-use disposable head.

ON THE DAY OF YOUR SURGERY

Please arrive early for your procedure – There will be admission forms to be filled in and your Anesthetist would like to meet you to discuss your health, medication and previous anesthetic experience as well as answer any questions you may have. Wear comfortable, loose fitting clothes that do not have to be pulled on over your head, i.e., a button-down or zipper blouse or shirt and loose fitting skirt or pants.

Leave valuables at home.

It is best not to wear make-up (including lipstick, mascara and nail polish – as this puts you at higher risk of infection)

Regular medication (excluding Warfarin/blood thinners and Diabetic medication – see above) should be continued as usual including the morning of surgery (taken with a small sip of water)